SUPERIOR COURT, COUNTY OF IMPERIAL

CASÉ NO.____

DEFENDANT: DATE:
VIOLATIONS:
COURT APPEARANCE DATE:
□ REVIEW: PAYMENT □ REVIEW: COMMUNITY WORK SERVICE
PLEA: □ FINDING □ GUILTY □ NOT GUILTY □ NOLO CONTENDERE
COURT ORDER: FINE
□ ATTORNEY: □ WINDOW ARRAIGNMENT I PROMISE TO APPEAR AT THE ABOVE DATE AND TIME/PAY
Defendant Address: